

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) RUTH IRENE GILLINGS

Office (if applicable)

Mailing Address (include city and zip code) PO Box 2948 SPARKS NV 89432

District (if applicable)

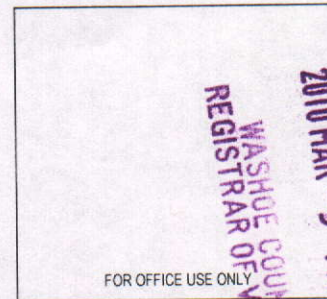
Telephone No. 775-359-5482

E-Mail Address

Select Appropriate Box(es)

- ☒ CANDIDATE ☐ PAC ☐ POL PRY ☐ IND EXP ☐ NONPROFIT CORP
☐ LEGAL DEFENSE FUND ☐ AMENDED ☐ LOCAL BAG

- ☐ Annual Filing - Due January 15, 2010
 Period: January 1, 2009 - December 31, 2009
- ☒ Report #1 - Due June 1, 2010*
 Period: Jan. 1, 2010 - May 27, 2010
- ☐ Report #2 Due - October 26, 2010*
 Period: May 28, 2010 - Oct. 21, 2010
- ☐ Report #3 Due - January 15, 2011**
 Period: Oct. 22, 2010 - Dec. 31, 2010
- ☐ Annual Filing - Due January 15, 2011
 Period: January 1, 2010 - December 31, 2010



- * These Reports are filed by incumbents/candidates in the 2010 election cycle
 ** Third Report suffices for 2011 Annual Filing if candidate also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100
 (See page 1 of instruction sheet)
2. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)
3. Total Monetary Contributions in the form of loans that were forgiven
 (See page 2 of instruction sheet)

This Period

Cumulative
From Beginning of
Report Period #1
through End of
This Reporting
Period

00	00
00	00
00	00

This Period

Cumulative From
Beginning of
Report Period #1
Through End of
This Reporting
Period

4. Total Amount of Monetary Contributions Received
 (Add Lines 1 through 3) (See page 2 of instruction sheet)
5. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind))
 (See page 2 of instruction sheet)
6. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)

EXPENSES SUMMARY

7. Total Monetary Expenses Paid in Excess of \$100
 (See page 2 of instruction sheet)
8. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature Ruth Irene GillingsDate 03-09-10

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State of Nevada

Name (print) _____ Office (if applicable) _____ District (if applicable) _____
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AFFIRMATION

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Leeth Irene Gillings
 Signature

03-09-10
 Date

RECEIVED

2010 MAR -9 PM 1:32

WASHOE COUNTY
REGISTRAR OF VOTERS

FOR OFFICE USE ONLY

RUTH IRENE GILLINGS

Name (print)

P.O. Box 2948 Sparks NV

Office (if applicable)

775-359-5482

District (if applicable)

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E-Mail Address

Select Appropriate Box(es)

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